

C.L. "BUTCH" OTTER- Governor RICHARD M. ARMSTRONG - Director DEBBY RANSOM, R.N., R.H.I.T – Chief BUREAU OF FACILITY STANDARDS 3232 Elder Street P.O. Box 83720 Boise, Idaho 83720-036 PHONE: (208) 334-6626 FAX: (208) 364-1888 E-mail: fsb@idhw.state.id.us

May 7, 2007

Shannon Mecham, Administrator Alterra Wynwood at Riverplace 739 East Parkcenter Blvd Boise, ID 83706

License #: RC-401

Dear Mr. Mecham:

On April 4, 2007, a complaint investigation survey was conducted at Alterra Wynwood at Riverplace. As a result of that survey, deficient practices were found. The deficiencies were cited at the following level(s):

• Non-core issues, which are described on the Punch List, and for which you have submitted evidence of resolution.

This office is accepting your submitted plan of correction and evidence of resolution.

Should you have questions, please contact Polly Watt-Geier, MSW, Health Facility Surveyor, Residential Community Care Program, at (208) 334-6626.

Sincerely,

POLLY WATT-GEIER, MSW

Team Leader

Health Facility Surveyor

Residential Community Care Program

PWG/sc

c:

Jamie Simpson, MBA, QMRP Supervisor, Residential Community Care Program



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April 13, 2007

Shannon Mecham, Administrator Alterra Wynwood at Riverplace 739 East Parkcenter Blvd Boise, ID 83706

Dear Mr. Mecham:

On April 4, 2007, a complaint investigation survey was conducted at Alterra Wynwood at Riverplace. The facility was found to be providing a safe environment and safe, effective care to residents.

Please bear in mind that non-core issue deficiencies were identified on the punch list, a copy of which was reviewed and left with you during the exit conference. The completed punch list form and accompanying evidence of resolution (e.g., receipts, pictures, policy updates, etc.) are to be submitted to this office by May 4, 2007.

Should you have any questions about our visit, please contact me at (208) 334-6626.

Sincerely,

JAMIE SIMPSON, MBA, QMRP

Supervisor

Residential Care Assisted Liviing Program

Pallywest-Dair, MSW for

JS/slc

Enclosure



C.L. "BUTCH" OTTER – Governor RICHARD M. ARMSTRONG – Director DEBBY RANSOM, R.N., R.H.I.T - Chief BUREAU OF FACILITY STANDARDS 3232 Elder Street P.O. Box 83720 Boise, Idaho 83720-0036 PHONE: (208) 334-6626 FAX: (208) 364-1888 E-mail: fsb@idhw.state.id.us

April 13, 2007

Shannon Mecham, Administrator Alterra Wynwood at Riverplace 739 East Parkcenter Blvd Boise, ID 83706

Dear Mr. Mecham:

On April 4, 2007, a complaint investigation survey was conducted at Alterra Wynwood at Riverplace. The survey was conducted by Sydnie Braithwaite, RN, Polly Watt-Geier, MSW, and Karen McDannel, RN. This report outlines the findings of our investigation.

Complaint # ID00002544

Allegation #1:

The facility did not protect 2 residents who were having inappropriate sexual

behaviors.

Findings:

On April 4, 2007 between 1:00 p.m. and 3:45 p.m., staff and an identified resident's family member were interviewed. They stated the staff protected the residents when there was inappropriate sexual behaviors between the 2 residents by assuring they were always separated until 1 of the residents was moved into a different facility.

Conclusion:

Unsubstantiated. The facility acted appropriately by implementing interventions

following alleged inappropriate sexual behaviors between 2 residents.

Allegation #2:

There was not a BMP to guide staff on how to intervene with the residents

inappropriate sexual behaviors.

Findings:

Refer to Non-Core issues Punch List

Conclusion:

Substantiated. The facility was issued a deficiency at IDAPA 16.03.22.225 for not having documented evidence of behavior tracking or a behavior management plan to guide staff on how to intervene with the residents inappropriate sexual behaviors.

Shannon Mecham, Administrator April 13, 2007 Page 2 of 2

The facility was required to submit evidence of resolution within 30 days.

Allegation #3.

There were no incident reports to document the behaviors or what steps had been

taken to protect the residents.

Findings:

Review of the facility's incident and accident reports on April 4, 2007, revealed incident reports for the inappropriate sexual behavior or contact between residents. On April 4, 2007 at 3:26 p.m., the administrator stated, incident reports had been

completed and faxed to corporate headquarters for review.

Conclusion:

Unsubstantiated. Although it may have occurred, it could not be determined during

the complaint investigation.

Based on the findings of the complaint investigation, the facility was found to be out of compliance with the rules for <u>Residential Care or Assisted Living Facilities in Idaho</u>. A Statement of Deficiencies has been issued to your facility. Please develop a Plan of Correction as outlined in the cover letter to the Statement of Deficiencies. AND/OR Non-core issues were identified and included on the Punch List.

If you have questions or concerns regarding our visit, please call us at (208) 334-6626. Thank you for the courtesy and cooperation you and your staff extended to us while we conducted our investigation.

Sincerely,

POLLY WATT-GEIER, MSW

Team Leader

Health Facility Surveyor

Residential Community Care Program

Pally Wald- Deive, USW

PWG/sc

c:

Jamie Simpson, MBA, QMRP, Supervisor, Residential Community Care Program



BUREAU OF FACILITY STANDARDS P.O. Box 83720 Boise, ID 83720-0036 (208) 334-6626 fax: (208) 364-1888

Facility Name	[7]21 A.4-1	
Administrator Administrator	Physical Address REPARCE 739 E. Park C	Phone Number 338-5600
Administrator	City	ZIP Code
Sharmon hiechan	City	83706
Survey Team Leader	Survey Type	Survey Date
Polly With - Geier	Complan & Min	restigation 414107
NON-CORE ISSUES		
ITEM RULE # # 16.03.22	DESCRIPTION	DATE BFS RESOLVED USE
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5-4-07	The state of the s	4/4/07
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